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COMMITTEES AND CONSENSUS: HOW MANY HEADS ARE BETTER THAN ONE?

ABSTRACT. The first section of this paper asks why the notion of consensus has recently come to the fore in the medical humanities, and suggests that the answer is a function of growing technological and professional complexity. The next two sections examine the concept of consensus analytically, citing some of the recent philosophical literature. The fourth section looks at committee deliberations and their desirable outcomes, and questions the degree to which consensus serves those outcomes. In the fifth and last section it is suggested that if I am to subscribe to a consensual outcome responsibly I must be personally committed to it, and that this requires a form of knowledge I call 'fiduciary', in this case knowledge of the competence and trustworthiness of other participants in deliberation whose expertise may have influenced my agreement.

Key Words: collective decision-making, committees, consensus, fiduciary knowledge

I. SAFETY IN NUMBERS

Apart from *consensus gentium* arguments in classical and early modern times, some discussion in Comte and Mill, and an implicit use of the concept by Peirce, consensus has not been a central topic in philosophical thought. Recently, however, it has come to the fore, especially in epistemology (see, e.g., Lehrer *et al.*, 1981) and the philosophy of science (see, e.g., Laudan, 1984); an issue of *Synthese* was devoted to the topic in 1985. The idea has been familiar in other contexts: in religious thought (the 'sense' of a Quaker meeting, the legislative force of consensus in Islam), in political discussion, where it is closely associated with the more fully worked out concept of consent (as in 'the consent of the governed'), and in economics, where it has played a role in rational choice theory and is the subject of a growing literature, much of it highly technical. In these contexts, however, the defini-

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tion of the concept has been loose and far from uniform; a work on 'mathematical consensus theory' purporting to summarize the field (Kim *et al.*, 1980), while it covers in thorough detail the generation of outcomes by the manipulation of various preference functions, does not define or deal directly with consensus as such at all.

Closely following on the formal interest in consensus in the philosophical literature has come its salience in discussions of the medical humanities. This is not because of its association with consent in a medical setting, though the problem of 'informed consent' there has been visible for somewhat longer; rather it springs, I take it, from changes that have been taking place in medical practice, the effect of which has been to shift the focus of decision-making from the individual to the collective level. This trend has been provoked by a number of parallel developments – in the state of scientific knowledge, in technology, in the law – which have jointly challenged the competence and standing of the individual practitioner who, in his (usually 'his') unquestioned wisdom, represented the medical profession for many years not only in the popular imagination but also in its own.

The importance of consensus has come to be felt more in settings where workers from different areas are required to arrive at decisions jointly – and not just different specialist areas but different professional ones. A committee that has on it a physician, a nurse, a social worker, a representative of a patients' advocacy group, a lawyer, an administrator, and a philosopher, and that has to decide on, or even just advise about, such questions as admission and retention of patients with new and rare diseases and conditions and the provision or withholding of scarce drugs, therapeutic technologies, or basic life support clearly needs a mechanism for the resolution of differences and the closure of deliberations different from that of a homogeneous research group.

Why should such heterogeneous committees exist at all, why isn't the physician's knowledge and expertise still enough? In the majority of cases it probably is still enough, though even on the purely medical side the development of specialization, and changes in professional lifestyle, frequently make the team, rather than the individual, the operative unit. But contemporary society is less inclined than previous societies to place unquestioning trust in the solo practitioner. Even the most competent and self-confi-

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dent doctor may be more than willing to seek safety in numbers when acting, as he or she often must, with imperfect information, at the limit of professional understanding, under the pressure of legal accountability, and under the pressure of time. And if this holds for the competent majority, it holds even more strongly for the sizeable minority who, however reluctant the profession may be to confront the fact, really are less than competent – though they may still be self-confident, which naturally makes matters worse.

II. CONSENT, COMPROMISE, ACQUIESCENCE

Consensus, however, is not the only form of decision to emerge from collective deliberation. Democratic elections are a highly visible and roughly effective form of collective decision-making but they surely do not proceed by consensus; most committees in our society operate according to Robert's Rules of Order, but these, while again ensuring a measure of democracy, are not rules for the achievement of consensus. There is a cluster of concepts related by comparison and contrast to that of consensus, and it would be well before proceeding to explore this analytic territory, if only briefly. Also the term consensus itself has been used in different ways, so that the corresponding conceptual field has an internal structure that needs to be delineated.

'Consent' and 'consensus' have the same etymological root and very nearly the same content. But they differ in their application, emphasis in the former case being on the act of agreement, in the latter on the fact or substance of it. In medical contexts 'consent' comes into play mainly as 'informed consent', the act of a patient in agreeing to the performance or withholding of some procedure. However this use, along with others ('parental consent' is a good example) shows an important conceptual difference: what is consented to may *not* be what the consenting party really wants, but only what he or she allows or permits; it may be (and in medical contexts often is) only the lesser of several evils, not something the agent would ever have subscribed to as a positive recommendation.

As far as that goes, consent need not even mean understanding, it may be nothing more than passive acquiescence. One doctor, Saul Moroff, has been quoted as saying that "the doctor's moral authority sometimes makes truly informed consent almost impos-

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sible: 'With a lot of patients, if you say, "Hello there. I'd like to remove your carotid artery and the right lobe of your brain," they'll say, "O.K."'" (Bouton, 1990, p. 62). And it is not only the patient in awe of authority who may acquiesce, 'go quietly', as the term suggests; there are values of social and collegial peace and quiet that tend to inhibit disagreement or protest on issues that fall below a moral threshold that varies strikingly from individual to individual. At what point must I speak out in the face of an accepted practice that may only recently, because of improved knowledge or heightened sensibility, have shown itself to be morally dubious, but changing which will be costly or inconvenient? On a less thorny level it may be that I am inclined to yield to a colleague without challenge or even discussion because I take her position on a certain issue to be more authoritative than my own, or simply because I have complete confidence in her. In fact having colleagues for whom and in whom one can have such respect and trust is a normal condition of professional life. (However, this is a special case, to which I will return. It involves what I call 'fiduciary knowledge' and may count as consensus if certain conditions are met.)

Consensus too may sometimes be reluctant, but on the whole the expectation is that the members of bodies whose deliberations issue in consensus will all agree that the outcome is, if not the very best in the opinion of each, at least thoroughly acceptable to each. If this were not the case it would seem misleading to call the process consensual and more honest to use a voting procedure that allows for negative votes or even minority opinions to be recorded. So consent need not imply consensus. If I have agreed to a voting procedure I automatically consent to the outcome, though I may neither be pleased by it (which is the root meaning of 'agreement') nor feel along with others that it is right (which is the root meaning of 'consensus'). In such a case we might want to say that there is procedural but not substantive consensus (cf. Moreno, 1990, p. 7).

I may also concede an outcome with which I disagree in some respect in exchange for someone else's concession on some other point, but this is not consensus either; "consensus, or agreement of opinion on the part of all concerned, is categorically distinct from compromise, or agreement by mutual concession" (Braaten, 1987, p. 347). Compromise is to be sure a way of *concluding*, and there's another term that warrants examination: one might envisage a

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study of the pragmatics of concluding – let's get it over with, let's get out of here – and as far as that goes of the pragmatics of committee deliberations, of collective decision-making in general. Consensus would show up in this, but only as one way, and a comparatively rare one at that, of concluding discussion and establishing a basis for action.

It is generally admitted in the literature that consensus does involve something more than acquiescence or compromise. "What we call consensus involves either an intellectual or an emotional relation to the object which may be justly characterized as *agreement* with it. Commitment may be too strong a term ... but at least [consensus] suggests some degree of positive attachment or adherence" (Partridge, 1971, p. 79). There are some deviant usages: Alvin Goldman for example remarks that "all sorts of methods can yield consensus: brain-washing, the threat of the rack or burning at the stake, totalitarian control of the sources of information. Consensus reached by these means does not guarantee rationality" (Goldman, 1987, p. 120) – but the first two of these would surely be cases of unwilling acquiescence rather than consensus, and the third would be consensus only if those agreeing did not and could not know that their sources of information were tainted, i.e., lacked fiduciary knowledge in the sense to be specified. Where the consensus about consensus breaks down is on the point of operation of the agreement, its content, and the mode of arriving at it.

III. THEORIES OF CONSENSUS

Keith Lehrer's seminal arguments claim that 'consensual rationality' in a group is exhibited in the iterated averaging of the personal probabilities of the group members (i.e., their individual estimates of the likelihood that some proposition under discussion is true), weighted in terms of their various degrees of respect for one another, and leading in the limit to a 'consensual probability'. This method claims considerable strength, since "under expected conditions personal probabilities will coincide with consensual probabilities and consensual probabilities will coincide with truth" (Lehrer, 1987, p. 87). However, the cases to which the method was originally taken to apply were limited to "allocating some sum among alternatives ... [or] finding a consensual ranking of alternatives" (Lehrer *et al.*, 1981, p. 14).

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As a number of commentators have pointed out, Lehrer's consensus-seeking groups seem neither to engage in any sort of persuasive discussion nor to seek any new information. Jürgen Habermas has a sharply different concept of consensual rationality, which has been explicitly contrasted with Lehrer's by Jane Braaten (1987). For Habermas consensus must be arrived at discursively; his account of what this means, though directed to larger social questions, constitutes an admirable description of what ought to go on in a committee whose recommendations are to carry the force of consensus:

> Discourse can be understood as that form of communication that is removed from contexts of experience and action and whose structure assures us: that the bracketed validity claims of assertions, recommendations, or warnings are the exclusive object of discussion; that participants, themes and contributions are not restricted except with reference to the goal of testing the validity claims in question; that no force except that of the better argument is exercised; and that, as a result, all motives except that of the cooperative search for truth are excluded. If under these conditions a consensus about the recommendation to accept a norm arises argumentatively, that is, on the basis of hypothetically proposed, alternative justifications, then this consensus expresses a 'rational will'. Since all those affected have, in principle, at least the chance to participate in the practical deliberation, the 'rationality' of the discursively formed will consists in the fact that the reciprocal behavioral expectations raised to normative status afford validity to a *common* interest ascertained *without deception*. The interest is common because the constraint-free consensus permits only what *all* can want (Habermas, 1975, pp. 107–108).

It seems clear that committee deliberations will in practice rarely take the pure Lehrer-Wagner form and that they will normally involve argument. Still, the idea of arriving at a consensus by successive approximations, by several *rounds* of argument, is certainly plausible. The structure of a series of Habermas-type discussions, in which no group member changed his or her mind about any other but in which positions on the issue shifted in the light of arguments made in the previous round, might, if formalized, approximate the Lehrer model. A working strategy that essentially follows Lehrer's pattern (though it was developed independently and much earlier, in Rand Corporation studies on expert opinion) is found in the Delphi technique, in which the (often startlingly divergent) results of first-round questionnaires are fed back in statistical form to the same participants for a

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second round, and so on. Harold Sackman, in his critique of this model, anticipates Braaten's confrontation between Lehrer and Habermas and arrives at a conclusion very similar to hers:

> ... the Delphi procedure arrives at ... consensus by feeding back the 'correct' answer, by rewarding conformity and effectively penalizing individuality, and by proffering nonindependent iterative results as authentic expert consensus. Authentic consensus refers to group agreement reached as a result of mutual education through increased information and the adversary process, which leads to improved understanding and insight into the issues; it does not refer to changes of opinion associated primarily or exclusively with bandwagon or statistical feedback (Sackman, 1975, p. 48).

Sackman cites studies that show a 'specious consensus' emerging from iterated estimations with feedback in unstructured group settings, and suggests some of the psychological mechanisms that account for this. For example, "the presentation of median opinions (after the first round) and the coercion toward conformity are reassuringly represented to all as reasoned consensus. By the third or fourth round, the holdout individualist responses pose the threat of yet another tedious run through the same items, and even die-hards are inclined to yield to save everyone the dreary routine of another round" (Sackman, 1975, p. 51).

There is a sense in which, for Lehrer as well as for Delphi, the personal interaction of the group is superfluous. ('Conventional Delphi' is conducted by correspondence, and anonymously.) If we know the initial positions and the weightings in terms of respect, then we can simulate round after round of approximation and emerge with something that could plausibly have been predicted as the consensual result; furthermore it is likely to be within limits of acceptability to those members of the group whose initial positions were not wildly contradictory, and who respect their colleagues and are respected by them. To put the consensus completely out of reach, a given individual would have neither to respect others much nor be much respected and would have to have occupied an extreme position in the first round. (It need hardly be said that such a group member would probably not be very effective in argument either.) While this observation underlines something artificial about the method, as compared to the discursive interaction envisaged by Habermas, it must nevertheless be said that the ability to compute a predicted consensus might be extremely useful in circumstances where many rounds

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of argumentative deliberation proved to be a luxury the situation could not afford.

Given time, however, people do learn, they do change their opinions of one another in the course of argument, and they do seek new information. If we unpack the consensus-seeking process a little further we see that at least three different moments in the process need to be distinguished: the initial situation of the participants, the ways in which they change their positions, and the collective judgment that emerges (if it does). On reflection it appears that the initial situation must already be one of procedural consensus, if not first-order (we agree about how we are to conduct the inquiry) then second-order (we agree about how we are to decide how to conduct the inquiry). If this condition is not met at *some* level – and procedural consensus can in principle be of higher orders – then there is no basis for deliberation.

Further, however, it seems that if the process is to have any chance of converging there should from the beginning be *some* degree of substantive consensus as well. Isaac Levi (in the course of a critique of the Lehrer-Wagner position) distinguishes between "that consensus of the participants at the beginning of inquiry which constitutes the background of shared agreements on which the investigation is initially grounded ... [and] a consensus ... reached as to the outcome of inquiry". And, he continues, "it is desirable whenever feasible to resolve disputes by engaging in inquiry based on shared agreements which beg no controversial issues". In other words inquiry proceeds from an initial consensus to a final one, and it is worth taking some pains to clarify the former before starting out in quest of the latter: "... agents should first identify their shared agreements and modify their credal states so as to restrict themselves to shared agreements. On this basis, they may then proceed to engage in whatever deliberations may be appropriate to settle their differences" (Levi, 1985, pp. 3, 4). They may also engage in collaborative research; as Barry Loewer and Robert Laddaga remark, "investigators who agree on a program of research may come to agreement concerning hypotheses by carrying out that research. ... consensus is achieved, if at all, by experimentation and argumentation" (Loewer *et al.*, 1985, p. 93).

The question remains whether the achieved consensus has anything directly to do with the method by which it was achieved.

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Jonathan Moreno has distinguished between consensus at the level of cases and consensus about the merits of principles, or 'deep consensus'; his experience and that of others (for example Stephen Toulmin, whom he cites) suggests that it is much easier for people to agree *that* a course of action is right than for them to agree *why* a course of action is right (Moreno, 1988, p. 420). A similar point is made in a wider context by Rachel and Larry Laudan, who attack the myth that scientists agree about anything much except whatever theory is dominant in their respective fields at a given time. By a dominant theory they mean one that "is superior to *all* its extant rivals by *every* extant set of standards utilized in that field"; when this condition is met there is consensus all right, but "consensus about the theories in a discipline may well disguise quite wide differences about what constitutes 'goodness' in a theory" (Laudan *et al.*, 1989, pp. 225, 235).

In both these cases further inquiry is warranted into just what it was about the case that enabled everyone to agree on it in spite of deep differences, and just what it is about a theory that thrusts it into dominance, enabling it to meet the challenges of rival theories, in spite of professional disagreements about what makes any theory good. Such an inquiry might reveal hitherto unsuspected structural or epistemic features that command substantive agreement even under methodological uncertainty – and might show that science is after all more strongly convergent than Laudan, for example, seems to think (cf. Laudan, 1984, *passim*). That conjecture, however, must wait for another occasion.

IV. WHAT CONSENSUS IS GOOD FOR

In the light of all these relatively technical considerations I would like now to re-direct the argument and start from the process of deliberation itself, rather than from the assumption that it must issue in consensus. Why do committees deliberate, and what do they hope their deliberations will accomplish? There can of course be any number of answers to the first of these questions: perhaps they just like to get together. Usually, however, in the present context at least, a problem can be assumed, and one that needs to be addressed more or less urgently. Let me suggest seven features that might reasonably be hoped to characterize the outcome of a committee deliberation in a medical setting and deal briefly with them in the light of the concept of consensus. Such an outcome

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should if possible be: (a) right; (b) clearly stated; (c) timely; (d) humane; (e) broadly based in the community; (f) generally acceptable to the community; and (g) defensible in the event of legal challenge.

Of these desiderata it seems that (e), (f), and (g) are the most clearly served by aiming at consensus, and as far as that goes constitute by themselves sufficient reasons for aiming at it. (g) in particular probably accounts for a great proportion of the concern about the subject: since consensus underlies the notion of 'customary and reasonable' standards of care, the fact that treatment was determined by prior consensus is *prima facie* evidence that such a standard has been met. (d) is also likely to be facilitated, to some extent at least, by aiming at consensus, since in a professional setting human sensibilities tend to be less uniformly distributed than technical competence, and a defect of sympathy or consideration that one committee member overlooks may be picked up by another.

But (a), (b), and (c) seem to me unlikely to be helped by a requirement of consensus; (b) and (c) may actually be hindered. As to the outcome's being right, it is not clear that consensus as such has anything to contribute. Consensus might be said to be analogous to belief in the relation it bears to knowledge: it implies that we have something less than knowledge. If a proposition is manifestly true, is anything added by the fact that we agree about it? After all how could we possibly not? It would certainly be odd to say that we had reached consensus on the propositions that $2 + 2 = 4$, that there are five of us at the meeting, or that today is Thursday. So a stubborn individualist might argue that the agreement or disagreement of colleagues is of no importance: if I am right, it doesn't matter whether they agree with me or not; if I am wrong, their agreeing with me will not help. Such a person might feel, if not show, some impatience at having to submit proposals or protocols to peer review committees, or ethics committees, or indeed committees of any kind, the concept of 'committee', in spite of its grammatical status, having become inescapably plural. Of course this attitude fails to notice the most importance case, namely the one in which my colleagues *dis*agree with me, thus suggesting at least the possibility that I am wrong but do not yet know it. This, though, does not engage the point about plurality, except to the extent that it moves from the isolated

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individual to a couple: the convincing disagreement of *one* critic would be enough.

Numbers do count in the establishment of scientific results – repeated readings are required, samples or patient populations have to be sufficiently large, findings must be able to be corroborated by many workers, and so on. But it is not clear that numbers of committee members count. The only reliable positive correlations to committee size are the amount of paperwork and the length of meetings; and in practice it is often possible for a very few members, by manipulations of meeting times, agendas, sub-committee assignments, etc., to defeat whatever purpose the large size of a committee was thought to serve. So consensus by itself does nothing positive for the rightness of a result, though insisting on it may help in a negative way, that is, increase the chances that a wrong result will be shown up for what it is.

Consensus may, all the same, do something positive for our *confidence in* the rightness of the result. If I am sufficiently sure of myself then I do not need your agreement, but being sure of oneself is not an intrinsic virtue. As remarked earlier, self-confidence is quite compatible with incompetence. It may not be rational to feel that mere agreement strengthens my position epistemically, but it is certainly reassuring, and thus genuinely strengthens my position psychologically – and not only for me but also in the eyes of others. My fellow committee members need to be *convinced* – another term in the lexical cluster, not dealt with in the opening section whose derivation has associations of struggle and conquest, activities in which allies are always welcome. However, they are just as welcome whether I am right or wrong, so this argument by itself does not help much. It will help only if I know something further about the origin of the agreement – fiduciary knowledge again, to which I will return at the end.

As to the clear formulation of the outcome of deliberation, committee prose is notorious for its opacity, and the drafting of any report is best left to the committee member whose joint command of the language and the issues is optimal. This however confers disproportionate power on the member in question, especially if he or she writes persuasively and may induce other members to propose changes in wording on principle. Even though the conclusion commands consensus, its statement may still be a matter of compromise. Add the pressure of time, and

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clarity is likely to suffer. With respect to timeliness, medical conditions unhappily tend to be progressive, pain insistent, death possibly imminent, resources scarce and perishable. There may not be time for many rounds of discussion, the gathering of much new information, etc., before a decision is urgently required. So a reflective and iterated progress towards consensus may be out of the question and to insist on it counterproductive.

Much of the discussion in the previous section can thus become suddenly irrelevant when the pressure is on. However this very fact may give it heightened relevance when the pressure is *off*. If we become convinced that *final* consensus – consensus as the outcome of deliberation – is an expensive luxury in the heat of the moment, this may lead us to appreciate more the value of *initial* consensus, the 'background of shared agreements' of which Isaac Levi speaks. 'Initial' and 'final' are of course relative terms. So far the implicit setting of the discussion has been a committee convened *ad hoc* to decide a difficult case, but what may be an initial consensus in this situation may have been the final consensus of a more leisurely meeting of the same or a larger group in more relaxed circumstances, at a seminar or retreat.

If I were to make one concrete recommendation it would be that the emphasis in the design of professional interactions should be primarily on the cultivation of long-range consensus about basic issues (by means of continued and repeated discussions as far removed from practical constraints as possible, i.e., taking Habermas's concept of discourse seriously), and only secondarily on the committee process proper, in which a mechanism of consensus-making is required to produce a quick decision. If sufficient support were given to the cultivation of the former, fewer and fewer problems would arise in connection with the latter, especially as situations that are now novel and perplexing become more familiar, so that a body of case experience can be accumulated. Politicians sometimes speak of 'building' consensus, and the metaphor is apt. It is one of the functions of leadership to recognize when consensus exists and when it needs to be built (see, e.g., Petro, 1985, pp. 106, 108). Leadership in the domain of the medical humanities has a wide-open opportunity at the present time to work at the building of the forms of initial consensus that will be needed by hospital committees of the future as they move into even newer and more challenging territory.

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V. CONSENSUS, FIDUCIARY KNOWLEDGE, AND THE INDIVIDUAL AGENT

The questions upon which consensus is sought in the hospital setting – as opposed to the more remote academic setting envisaged in the previous paragraph – are normally of the form "What is to be done?" and the answers will normally lead to an action: the doing or withholding of something. There will necessarily be an agent of the resulting action. The singular is deliberate: there may be many agents at different levels – the nurse who administers the procedure, the resident who orders it, the team attending who confirms the order – but each will bear some responsibility alone to the extent that he or she is truly an agent; and since Eichmann it has been generally held that this status is not so easily disclaimed. There will also, even more obviously, be a singular patient, the necessary correlative of the agent (the passive one to whom something is done, in contrast to the active one who does it). Even in psychiatric group therapy the group is not the patient, the individual is – though part of the point of group work is that patients can function provisionally as agents in each other's treatment.

What counts for patients counts for professionals too – that is, they are not absorbed into the group, each retains his or her individuality. The group seems to be 'more than the sum of its parts', but this 'more' has no objective status. It is just another way for individuals to think about the group. What transcends each (because carried by others) does not transcend all. Groups do not have independent existence, or indeed any existence (as anything more than a disconnected aggregate of biological individuals), except as this is conferred on them distributively by each individual subject who participates in or recognizes (in immediate experience or through acculturation) the group in question and its activities.

Now both 'committee' and 'consensus' have the ring of collective objectivity about them, have indeed been designed, we might say, precisely to transcend individual action and judgment. There is a deep issue here as to the *ontological* status of the collective (some of the claims made in the previous paragraph are controversial), but this is not the place or time at which to argue the point in detail. I will simply acknowledge that the existentialist in me wants to know where this business of consensus leaves the individual who participates in it: do I carry any less in the way of

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authorship of or responsibility for my own acts and beliefs because I form part of a consensus? To put the question in another way: who, if not I myself, is the author of a consensual judgment to which I have subscribed, the agent of an action done in accordance with it?

This business of collective existence has puzzled some thoughtful people, and one answer to it (in which the influence of Donald Davidson can be detected) is given by Lehrer:

> Consensus, like a language, is a sort of logical or mathematical fiction. There are many speakers of a language, each having a personal language, an idiolect, which each uses and understands in his or her more or less idiosyncratic manner. ... A language is the idiolect of the "average" speaker; a consensual probability is the probability of the "average" person. There are many assigners of probabilities each having a personal assignment, an *idioprob*, to coin a word, which each uses in thought and action. The consensual assignment is an abstraction, an aggregation or fiction extracted from individual assignments. The consensual assignment is, of course, manifested in concrete ways, as is the consensual language, but it is not necessary that any one person have the common language as his or her idiolect, though someone may, and it is similarly not necessary that anyone have the consensual probabilities as his or her idioprob, though someone may (Lehrer, 1987, p. 100).

This seems to me a weak and permissive sense of consensus, since I would have thought that *everyone* subscribing to the consensus "should have [in some honest sense of 'have'] the consensual probabilities as his or her idioprob", that if they did not it would not be a genuine consensus. Another difficulty, with respect both to consensus and to language, arises from the claim that "the consensual assignment is, of course, manifested in concrete ways, as is the consensual language". In what ways? Something definite is done, to be sure, or said or printed, taking the form in some obvious cases of a standard procedure, or a manual, or a dictionary. But the relation of that definite thing to 'the consensus' or 'the language' is still a matter for individual interpretation – at no point does it emerge into some ideal collective space with a being of its own. I see no need to posit the existence of any judgment, of any meaning, other than the judgments and meanings belonging to the intentional domains of individuals, *which include those individuals' understandings, however acquired, of what they take (individually) to be 'collective' about those judgments and meanings.*

Collectives, in other words, and collective manifestations (such

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as language and consensus), are among the resources available to individuals as they conceptualize their worlds and decide upon courses of action in them. My relation to my responsibilities will thus be modified by the knowledge that the position I subscribe to is one to which others also subscribe, that we have or form a consensus on the issue in question. But what sort of modification is this? Does it relieve me of my responsibility in the matter? I think not, but it does bear on my responsibility, construing this straightforwardly as requiring me to answer for my judgments, to give an account of the basis on which they rest. And its bearing on my responsibility involves the concept of *fiduciary* knowledge, to which I have alluded in passing and which requires now at least a brief elaboration.

If I form part of a deliberative body whose conclusions have legislative or advisory force, this is presumably on the basis of some knowledge I am taken to have, which I am expected to bring to bear in discussion on the way to the desired consensus. Now my knowledge comes in several forms: some of it is direct (I can cite it 'out of my head'), some indirect (I know how and where to look it up, or whom to ask, and can incorporate what I thus learn immediately, if only temporarily, into my body of direct knowledge). Having reliable access to indirect knowledge, however, involves direct knowledge of a special kind, namely *knowledge of the trustworthiness of my sources of information*. This is the kind of knowledge that I call 'fiduciary', a term whose root meaning (from *fides*, faith), suggests trust. Fiduciary knowledge is knowledge on the basis of which I can have confidence in what I can only know indirectly.

Now it seems to me necessary, if I am to derive any comfort from the fact that others share a consensus to which I subscribe, that I should have fiduciary knowledge of *their* reliability or trustworthiness. This means that I need to know quite a lot about them: their training, their publications, their habits, their quirks – much more, in fact, than members of most committees know about one another. This personal side of the matter is acknowledged in the Lehrer and Wagner method of consensus generation in their invocation of the notion of 'respect' – the more I respect a colleague, the greater the weight I assign to his or her position. But this is a relatively vague notion; and as Braaten wisely points out, Lehrer and Wagner "overlook the fact that it is not the respect itself, but the reasons for which a person deserves

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respect as a theorist or scholar, that count, and that they count whether or not the person actually receives the appropriate respect from his or her colleagues" (Braaten, 1987, p. 354).

Having fiduciary knowledge in the required sense involves precisely 'knowing the reasons for which a person deserves respect as a theorist or scholar'. This means that interpersonal relations in committees must come in for scrutiny in a new and perhaps unwelcome way. In a kinder gentler time everyone was taken to be a lady or a gentleman, the kind of person who would or wouldn't do certain things, who had neither to be reminded nor checked up on – a relic of the traditions of nobility, a word whose very meaning is knowledge (its opposite, 'ignoble', preserves the guttural component of the root). People one knew in this sense were to be trusted implicitly and automatically. Most of us still know some people this well, but on a committee where I am to subscribe to a consensus on matters of life and death I must either get to know the other members this well in a hurry, or ask some pretty pointed questions about them.

In the end, then, the consensus question is one of sociodynamics and perhaps (Moreno, 1990, pp. 13–16) of sociometrics. But I revert to my existentialist stance: I am alone even amid consensus, I have to put my own judgment and responsibility on the line. In the context of the expert committee, as distinct from the general climate of opinion, commitment is *not* too strong a term. Jean-Paul Sartre, in expounding his theory of groups, says that if I join ninety-nine others in a collective action, each member of the group acts individually with the strength of a hundred (Sartre, 1976, p. 393). That is because physical strength is additive. But decisions are not additive (which is why decision-making cannot really be collective); if the conclusion I have reached is right, it does not become any more right because ninety-nine other people agree with it. In the terms of my title, one head is good enough if I get it right, more heads are not better. And I have to get it right, or not join in the consensus. In doing so I may have to trust others – but the point of this last part of the argument is that I have to get their trustworthiness right, too.

It is of course always possible to give up the idea of consensus – to admit an impasse, decline to make a recommendation, or simply vote an issue up or down. Better that, perhaps, than subscribe to a consensus against one's better judgment, or on the basis of insufficient knowledge – fiduciary or otherwise.

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REFERENCES

Bouton, K.: 1990, 'Painful decisions', *The New York Times Magazine*, August 5, 22–25 and following.

Braaten, J.: 1987, 'Rational consensual procedure: Argumentation or weighted averaging?', *Synthese* 71, 347–354.

Goldman, A. I.: 1987, 'Foundations of social epistemics', *Synthese* 73, 109–144.

Habermas, J.: 1975, *Legitimation Crisis*, Beacon Press, Boston, Massachusetts.

Kim, K. and Roush, F. : 1980, *Introduction to Mathematical Consensus Theory*, Marcel Dekker Inc., New York and Basel.

Laudan, L.: 1984, *Science and Values: The Aims of Science and Their Role in Scientific Debate*, University of California Press, Berkeley, California.

Laudan, R. and Laudan, L.: 1989, 'Dominance and the disunity of method: Solving the problems of innovation and consensus', *Philosophy of Science* 56, 221–237.

Lehrer, K.: 1987, 'Personal and social knowledge', *Synthese* 73, 87–107.

Lehrer, K. and Wagner, C.: 1981, *Rational Consensus in Science and Society: A Philosophical and Mathematical Study*, Kluwer Academic Publishers, Dordrecht, The Netherlands.

Levi, I.: 1985, 'Consensus as shared agreement and outcome of inquiry', *Synthese* 62, 3–11.

Loewer, B. and Laddaga, R.: 1985, 'Destroying the consensus', *Synthese* 62, 79–95.

Moreno, J.: 1988, 'Ethics by committee: The moral authority of consensus', *Journal of Medicine and Philosophy* 13, 411–432.

Moreno, J.: 1990, 'Consensus by committee: Philosophical and social aspects of ethics committees', unpublished manuscript.

Partridge, P.: 1971, *Consent and Consensus*, Praeger Publishers, New York.

Petro, N.: 1985, 'Leadership and consensus: Humanitarian objectives in foreign policy', in M. Smith and K. Thompson, eds., *Consensus: Issues and Problems, The Credibility of Institutions, Policies and Leadership*, University Press of America, New York and London.

Sackman, H.: 1975, *Delphi Critique: Expert Opinion, Forecasting and Group Process*, Lexington Books, Lexington, Massachusetts.

Sartre, J.-P.: 1976, *Critique of Dialectical Reason*, New Left Books, London.

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